

Special Health Care Needs & Disabilities

Publicly funded services to identify and address Special Health Care Needs and Disabilities are described in Care Coordination Services, Early and Periodic Screening, Diagnosis and Treatment, Family Support Services, Early Hearing Loss Detection, Diagnosis and Intervention, and Immunization Program CHILD Profile

Key Findings:

Prevalence

Special Health Care Needs:

- Based on the 2003 National Survey of Children's Health, about 17% of children in Washington had a special health care need, compared to about 18% nationally. A significantly higher proportion of school-age children had a special health care need compared to children 0-4 years. This may be the result of improved identification when children enter school.
- No significant differences in the prevalence of CSHCN by gender, race, or poverty level were observed.¹

Disabilities:

- In 2004, about 19% of Washington 8th graders and 23% of 10th and 12th graders reported that they had a disability. (Data not shown)²

Disparities among Youth with Disabilities

Disability and Substance Use:

- In 2004, Washington 10th graders with a disability were more than twice as likely to report cigarette smoking in the past 30 days compared with those without a disability.²
- In 2004, about 23% of Washington 10th graders with a disability reported using marijuana in the past 30 days compared to 15% of those without a disability.²

Definitions:

Children with Special Health Care Needs:

Children and youth with special health care needs are those who have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions and who require health and related services of a type or amount beyond that required by children generally. (MCHB, 2001)³

Disabilities: Children having an activity limitation, who use assistance or perceive themselves as having a disability. (Healthy People 2010)

- In 2004, about 25% of Washington 10th graders with a disability reported binge drinking within the past two weeks compared to 18% of 10th graders without a disability.²

Violence

- Washington students with disabilities were more likely to report physical fighting in the past year (38%) compared to youth without disabilities (25%) and carrying a weapon at school (9%) compared to students without disabilities (4%).²

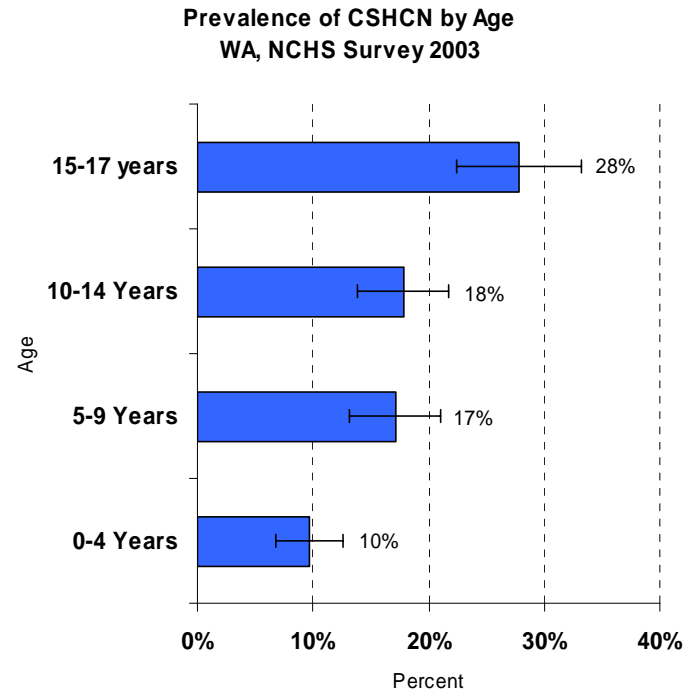
Access to Care:

- In Washington, youth with a disability were less likely to report a dental visit in the past year compared to youth without a disability. (Data not shown)²
- According to the 2003 National Survey of Children's Health, an estimated 45% of Washington's children with special health care needs received care within a medical home^b, compared to 49% of children without special health care needs. (Data not shown)¹

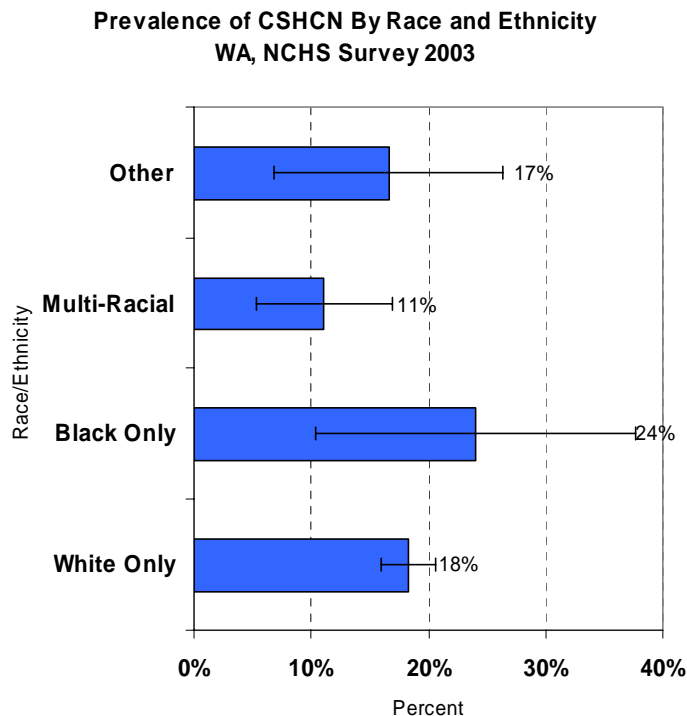
Rural Urban Differences

- Children with special health care needs living in suburban areas were the least likely to need routine preventive care (63%), while those in large towns were the least likely to need specialized therapies (16%) and the most likely to need substance abuse treatment (11%) compared to children with special health care needs living in other areas. (Data not shown).³

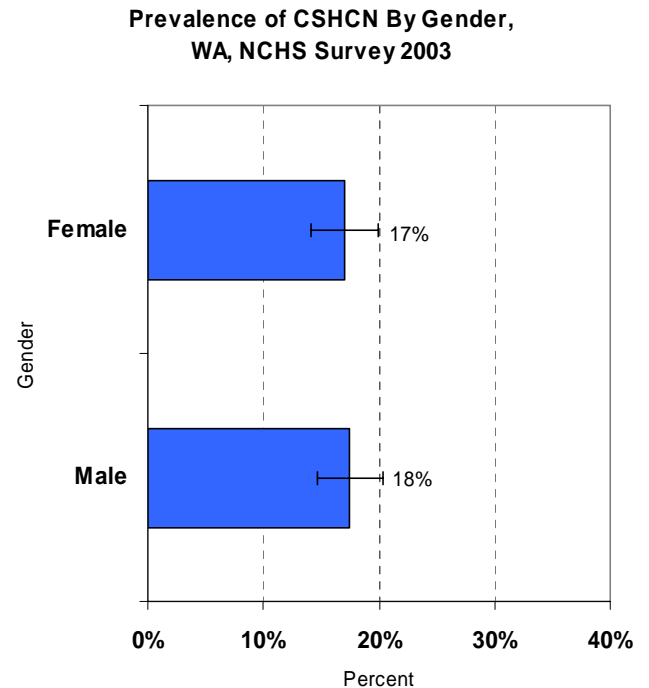
Age ¹



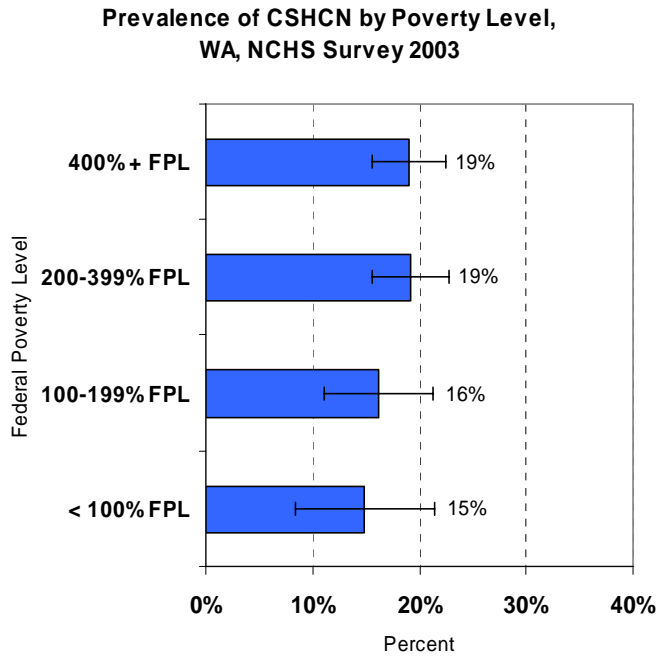
Race and Ethnicity ¹



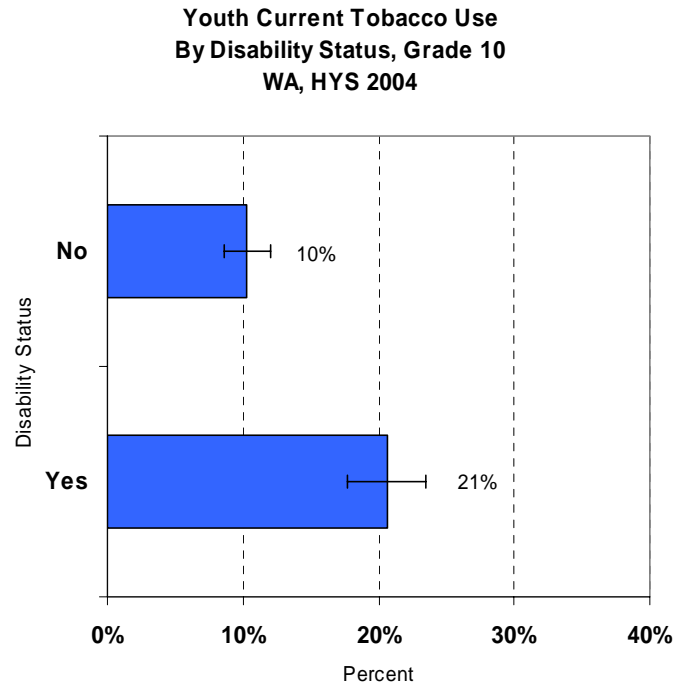
Gender ¹



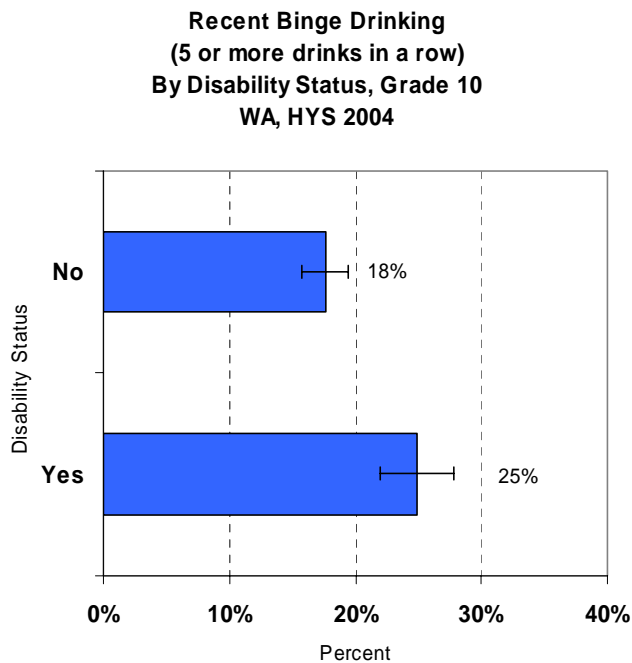
Poverty Level ¹



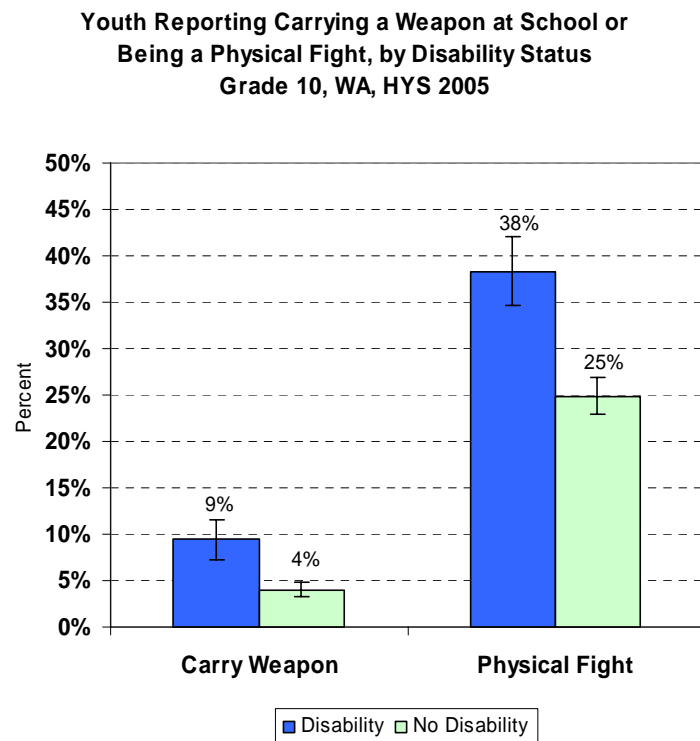
Tobacco Use ²



Binge Drinking ²



Violence ²



Data Sources

1. 2003 National Survey of Children's Health, Department of Health and Human Services, CDC, National Center for Health Statistics, Hyattsville, Maryland.
2. Washington State Healthy Youth Survey 2004. Washington State Office of Superintendent of Public Instruction, Department of Health, Department of Social and Health Services, and Department of Community, Trade, and Economic
3. 2001 National Survey of CSHCN, Department of Health and Human Services, CDC, National Center for Health Statistics, Hyattsville, Maryland. Website: <http://www.mchb.hrsa.gov/chscn/index.htm>
4. 2003 American Community Survey (ACS), U.S Census Bureau.

Endnotes

- a. Significance is based on 95% confidence intervals
 - b. Medical home: "An approach to providing health care services in a high-quality and cost-effective manner. Care is received from a pediatric health care profession whom the family trusts. Care is accessible, family-centered, continuous, comprehensive, coordinated, compassionate, and culturally effective. (American Academy of Pediatrics)
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